

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: SMART CARD COMPRISING A
PROTRUDING COMPONENT AND METHOD
FOR MAKING SAME
Attorney Docket Number:: 0579-1087
Request for Early Publication?: No
Request for Non-Publication?: No
Suggested Drawing Figure::
Total Drawing Sheets:: 3
Small Entity?: No
Latin Name::
Variety Denomination Name::
Petition Included?: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: FRANCOIS
Middle Name::
Family Name:: LAUNAY
Name Suffix::
City of Residence:: EPRON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 13, RUE DES GLYCINES
Address::
City of Mailing Address:: EPRON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 14610

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JACQUES
Middle Name::
Family Name:: VENAMBRE
Name Suffix::
City of Residence:: IFS
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 6, AVENUE JEAN VILAR
Address::
City of Mailing Address:: IFS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 14123

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2003/003139	10/23/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/13465	10/28/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::